

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100393336

12-19-2010

Candidate or Committee Name (Do not abbreviate. Use full name.)

MIKE S HOPE (FRIENDS OF MIKE HOPE)

Mailing Address

8712 26TH PL NE

City

LAKE STEVENS, WA

Zip + 4

98258

Office Sought (candidates)

COUNTY EXECUTIVE

Election Date

2011

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....		
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
	e. Small contributions \$25.00 or less not itemized and number of persons giving _____ (persons)		

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
12/10/10	VERN LITTLE 11609 32nd St NE LAKE STEVENS, WA 98258		X		100.00	100.00
		Occupation				
12/10/10	CAROLE BRAND 7924 212th st sw EDMONDS, WA 98026		X		25.00	25.00
		Occupation				
12/10/10	GRACE HOFER 13320 Hwy 99 Unit 123 EVERETT, WA 98204		X		35.00	35.00
		Occupation				
12/10/10	DAVID PRESTON P.O. Box 1777 EDMONDS, WA 98020	INSURANCE RESOURCE GROUP, INC EDMONDS, WA	X		250.00	250.00
		Occupation				
12/10/10	THOMAS CHAPO 18424 79th Street NE GRANITE FALLS, WA 98252		X		25.00	25.00
		Occupation				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			435.00	*See reverse for details.
		Amount from attached pages			965.00	

3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT

Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.

1,400.00

4. Date of Deposit

12/10/10

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature

Date

BLAIR C ANDERSON

12-19-2010

Treasurer's Daytime Telephone No.: (425) 299-3134

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Page 2

Candidate or Committee Name (Do not abbreviate. Use full name.)
MIKE S HOPE (FRIENDS OF MIKE HOPE)

Deposit Date
12/10/10

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate Total*
12/10/10	NOLA COLEMAN 1617 150th St SW LYNNWOOD, WA 98087	BOEING EVERETT, WA Occupation PROJECT MANAGER	X		300.00	350.00
12/10/10	AMIE BEISEL 11729 Sultan Basin Road SULTAN, WA 98294	Occupation	X		15.00	15.00
12/10/10	KEVIN PARKER 8 w. 28th Ave SPOKANE, WA 99203	Occupation	X		100.00	100.00
12/10/10	BRIDGET JOHNS 12527 173rd Ave SE SNOHOMISH, WA 98290	Occupation	X		50.00	50.00
12/10/10	ROBERT BARNETT PO BOX 210 LYNNWOOD, WA 98046	RETIRED LYNNWOOD, WA Occupation RETIRED	X		250.00	250.00
12/10/10	PAM BARNETT PO Box 210 LYNNWOOD, WA 98046	RETIRED LYNNWOOD, WA Occupation RETIRED	X		250.00	250.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 965.00